Haw River State Park Grand Camp Registration Form 2017

(Grandparents and grandchildren must fill out individual registration forms)

| Participants Name: | Rising Grade: _ | School Attending: | | |
|--|--|-----------------------------------|---|--|
| Address: | | Gender: | Date of Birth: | |
| Parent or Guardian (if applicable) | : | | | |
| Address: | | | | |
| Home Phone: | Daytime Cell: | | _ Email: | |
| Additional Parent or Guardian (if c | applicable): | | | |
| Address: | | | | |
| Home Phone: | Daytime Cell: | | | |
| T-shirt Size: | (Youth or Adult Sizes) | | | |
| Emergency Contacts/Other adults | with permission to pick up child | <u>:</u> | | |
| Name: | Phone: | | | |
| Relationship: | | | | |
| Media/Photography Permission | | | | |
| I,, give Haw Riv | er State Park, the permission to take pho | tographs or vide | o of me or my child for use in | |
| educational, promotional, and /or marketi | | ke photographs | or video of me or my child for use in | |
| educational, promotional, and /or marketi | | 9. 0 | | |
| | Grandparent Residential C | <u>Camp</u> | | |
| Week III Grand Camp | Week | IV Grand Co | amp | |
| Aug. 2 nd – 4 th | | 3 th -10 th | | |
| 10:00a.m. arrival Wed, till 2:00 p.m. Friday Residential Camp for children (rising 2 nd – 8 \$150/participant | | ial Camp for chi | l 2:00 p.m. Thursday dren (rising 2 nd – 8 th grade) | |
| Grandparent(s) Name(s): | | | | |
| Grandchild(ren) Name(s): | | | | |
| Child(ren) must be registered with | at least one grandparent. The g | randparent to | child ratio must be 1:2. | |
| Send completed forms to: | Haw River State Park | | | |
| | The Summit Environmental Education Center/Summer Camps | | | |
| | 339 Conference Center Drive | | | |
| | Browns Summit, NC 27214 | | | |

Phone:336.342.6181/342.6163 Fax: 336.342.0583 Email:hawriver.program@ncparks.gov